

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MeidasTouch			FEC IDENTIFICATION NUMBER ▼ C C00746073		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee J & Z Strategies			Date of Public Distribution/Dissemination 12 / 12 / 2020		
Mailing Address 5419 Hollywood Blvd Ste C135			Amount 56855.50		
City Los Angeles		State CA	Zip Code 90027-3480		Transaction ID : 500004900
Purpose of Expenditure Persuasion Mailer Piece		Category/ Type 		Date of Disbursement or Obligation 12 / 08 / 2020	
Name of Federal Candidate LOEFFLER, KELLY, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 473950.38			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee J & Z Strategies			Date of Public Distribution/Dissemination 12 / 12 / 2020		
Mailing Address 5419 Hollywood Blvd Ste C135			Amount 56855.50		
City Los Angeles		State CA	Zip Code 90027-3480		Transaction ID : 500004901
Purpose of Expenditure Persuasion Mailer Piece		Category/ Type 		Date of Disbursement or Obligation 12 / 08 / 2020	
Name of Federal Candidate PERDUE, DAVID, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 473950.38			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			113711.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Meiselas, Brett, Adam, ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 12 / 11 / 2020		

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 PAGE 2 OF 3
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NAME OF COMMITTEE (In Full) MeidasTouch	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00746073 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee J & Z Strategies			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 11 / 2020</div> </div>		
Mailing Address 5419 Hollywood Blvd Ste C135			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3156.76</div>		
City Los Angeles	State CA	Zip Code 90027-3480	Transaction ID : 500004906 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 08 / 2020</div> </div>		
Purpose of Expenditure Door hanger		Category/ Type	Name of Federal Candidate OSOUFF, T., JONATHAN, ,		
Name of Federal Candidate OSOUFF, T., JONATHAN, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		

Full Name of Payee J & Z Strategies			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 11 / 2020</div> </div>		
Mailing Address 5419 Hollywood Blvd Ste C135			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3156.77</div>		
City Los Angeles	State CA	Zip Code 90027-3480	Transaction ID : 500004932 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 08 / 2020</div> </div>		
Purpose of Expenditure Door hanger		Category/ Type	Name of Federal Candidate WARNOCK, RAPHAEL, ,		
Name of Federal Candidate WARNOCK, RAPHAEL, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">6313.53</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Meiselas, Brett, Adam, ,

[Electronically Filed]

Date

MM / DD / YYYY
12 / 11 / 2020

Signature

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Full Name of Payee US Military Vet Supplier, LTD		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 110 Walter Way Unit 1073		Amount <input type="text"/>	
City Stockbridge	State GA	Zip Code 30281-9511	Transaction ID : 500004940
Purpose of Expenditure Digital Billboard	Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate LOEFFLER, KELLY, , ,		<input type="checkbox"/> Support <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

Full Name of Payee US Military Vet Supplier, LTD		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 110 Walter Way Unit 1073		Amount <input type="text"/>	
City Stockbridge	State GA	Zip Code 30281-9511	Transaction ID : 500004941
Purpose of Expenditure Digital Billboard	Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate PERDUE, DAVID, , ,		<input type="checkbox"/> Support <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<input type="text"/>
(c) TOTAL Independent Expenditures.....▶	<input type="text"/>

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[Electronically Filed]

Date

/ /

Signature